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CONFIRMATION NO. 1786

SERIAL NUMBER 09/863,704	FILING OR 371(c) DATE 05/23/2001 RULE	CLASS 709	GROUP ART UNIT 2445	ATTORNEY DOCKET NO.
<b>APPLICANTS</b> Lakshmi Arunachalam, Menlo Park, CA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/792,323 02/23/2001 PAT 7,340,506 which is a CIP of 08/879,958 06/20/1997 PAT 5,987,500 which is a DIV of 08/700,726 08/05/1996 PAT 5,778,178 and claims benefit of 60/006,634 11/13/1995				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/11/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 33	<b>TOTAL CLAIMS</b> 25
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> DR LAKSHMI ARUNACHALAM 222 STAMFORD AVENUE MENLO PARK, CA94025				
<b>TITLE</b> NETWORK TRANSACTION PORTAL TO CONTROL MULTI-SERVICE PROVIDER TRANSACTIONS				
<b>FILING FEE RECEIVED</b> 3047	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	